PTO/SB/06 (05-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Applicat	Application or Docket Humber D9/467.55/		
(CLAIMS AS FILED -						OTHER	RTHAN	
(Column 1)		(Co	olumn 2)	SMALL ENTITY		OR	SMALL ENTITY		
FOR	NUMBER FILED	NUMBI	ER EXTRA	RATE	FEE	j ·	PATE	FEE	
BASIC FEE (37 CFR 1.16(é))					s′	OR		s	
TOTAL CLAIMS D7 OFR 1.16(c))	minus 20			× 9		OR	xs18:		
NDEPENDENT CLAIMS 37 CFR 1.16(b))	entrus 20			x : 43 -		OR	x : 86 :		
MULTIPLE DEPENDENT CLAIM PRESENT (17 CFR 1.16(d))			1.145		OR OR	+,290			
	<u> </u>								
If the difference in colum	TOTAL	L	OR	TOTAL	<u> </u>				
CLAI	MS AS AMENDED -	PART II		4.				·	
•	Column 1)	(Calumn 2)	(Cotumn 3)	SMALL I	ENTITY	OŖ		R THAN ENTITY	
	CLAMS EMAINING AFTER MENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total Total Cr CPR 1.96(d) Independent UI (cr CPR 1.96(d))	31 Minus	31	- /	x 5 9 -	1	OR	x 18 =	/	
Z Independent * CFR 1.16(b)	1 Minus	" 7	•	x s 43 •	T	OR	x \$ 86 =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+= 145-		ÓR	+:290	/	
617212				TOTAL ADD'L FEE	\	ÓR.	TOTAL ADD'L FEE		
	612011	0.5		ADDET CE	<u> </u>		AUULITEE		
	Column'1) (-	(Column 2) HIGHEST	(Column 3)					1 1 2 257	
		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
Total Total Grown well Tindependent Tindependent	ABNOMENT Minus '	PAD FOR	-	xs 9	FEE	, OR	× 5.18)	/	
Z Independent	Minus .	<u>//</u>	=	xs 43.	. /	OR	x 864		
FIRST PRESENTATIO	W OF MULTIPLE DEPENDEN	T CLASM (37 CF	R 1 16(dl)	+.145.		OR	290	-121 & ar ar a	
3				TOTAL	/		TOTAL		
				ADD'L FEE		OR	ADD'L FEE	<u> </u>	
(0	Column 1)	(Calumn 2)	(Cotumn 3)			1			
107 F 107 S 107 S 107 S 107 S 107 S		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
Total .	Minus *	PAID FOR	e	1.9	FEE		× s)8) =	· FEE ···	
Total (27 CPR 1.16(b)) Independent (27 CPR 1.16(b))	Minus	••	e	^3.7 =		OR	× 5.26=		
TT (22.028 1.466))	× 5 <u>43</u> +		OR	+ ,290	·				
FIRST PRESENTATIO	LATOT		OR	TOTAL					
			n =0° in	ADD'L FEE	L	OR	ADD'L FEE		
	n 1 is less than the entry in her Previously Paid For' th					:	TANGETTI	anii n t eri fi.	

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.
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